

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

IA ETHICS AND  
CAMPAIGN DISCLOSURE

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE** 2008 OCT 17 AM 10:17

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Jones County Democratic Central Committee

IMPORTANT: Indicate by # type of committee you are reporting for:

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

**FORM  
DR-2**

(Rev. 07/2007)

**DISCLOSURE  
REPORT**

**For Office Use Only**

Comm. #

Logged In

Scanned

Computer

Audited

9107

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Jay A. Miller  
**SIGNATURE OF PERSON FILING REPORT**

319-462-3882  
**TELEPHONE**

10-16-08  
**DATE SIGNED**

I AM FILING A

July 15 to Oct. 14, 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

1846<sup>62</sup>

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

3656.62

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

555.92

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$

3100.70

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jones County Democratic Central Comm

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7-15-08	ID# CK#	Merlin Moore 206 W. Main Anamosa Iowa		\$ 100 <sup>00</sup>	<input type="checkbox"/>
8-16-08	ID# CK#	Jrm Stadtmueller 14182 170 St Monticello Iowa		100 <sup>00</sup>	<input checked="" type="checkbox"/>
8-16-08	ID# CK#	Joe Cruise 12639 170th St Monticello, Iowa		80 <sup>00</sup>	<input checked="" type="checkbox"/>
8-16-08	ID# CK#	Nancy Jurgensen 2375 Co Rd X-40 Mechanicsville Iowa		100 <sup>00</sup>	<input checked="" type="checkbox"/>
8-16-08	ID# CK#	m. Alberta Strand Fawn Crk Circle Anamosa Iowa		100 <sup>00</sup>	<input checked="" type="checkbox"/>
8-16-08	ID# CK#	Unitemized Contributions & cash		1230 <sup>00</sup>	<input checked="" type="checkbox"/>
9-8-08	ID# CK#	Unitemized Contributions & Cash		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1810<sup>00</sup>

TOTAL (if last page of this schedule)

\$ 1810<sup>00</sup>

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page One of One  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Jones County Democratic Central Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8-9-08	ID# CK# 1007	Mike Lasack Oxford Junction, Ia	Mileage Reimburse- ment for Fundraiser	\$ 50 <sup>00</sup>
8-12-08	ID# CK# 1008	Grace Zimmerman Anamisa, Iowa	Reimb. for stamps, paper, advertising & other Food Fest expenses	212 <sup>00</sup>
8-20-08	ID# CK# 1009	Family Foods Monticello, Iowa	Buns for Food Fest	16 <sup>10</sup>
8-20-08	ID# CK# 1010	Wyoming Fair Assoc. Wyoming, Iowa	Pavillion Rent - Food Fest	15 <sup>00</sup>
8-20-08	ID# CK# 1011	David Waight Monticello Iowa	Reimb. for beverage for Food Fest	140 <sup>97</sup>
8-20-08	ID# CK# 1012	Jane Lawrence Monticello, Ia.	Reimb for Food - Demo Food Fest	26 <sup>56</sup>
8-31-08	ID# CK# 1013	Monticello Express Monticello, Iowa	Advertising of Food Fest	55 <sup>00</sup>
7-28-08	ID# CK# N/A	Withdrawal from ✓ing acct @ Farm Bank, Anamosa, Ia	Purchase of 50 <sup>00</sup> Savings Bd/Prize	25 <sup>00</sup>
SUB-TOTAL				\$ 540.63
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

## Reset Form

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

COMMITTEE NAME (Must be same as on Statement of Organization)  
Jones County Democratic Central Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
Prior Period	ID#  CK#	N/A	Computational Error in prior reporting period	\$ 15.29
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
SUB-TOTAL				\$ 15.29
TOTAL (if last page of this schedule)				\$ 555.92

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(for Schedule B)